

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street)

2600 VIRGINIA AVE NW

SUITE 200

☐Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20037

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00255695

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2011

through

06

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

William Redpath

Signature of Treasurer

Electronically Filed by William Redpath

Date

08

20

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

The Committee wishes to disclose the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate(s). 2) The Libertarian National Committee (LNC) requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR 104.7(b)(1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. This 'follow up' request a) clearly asks for the missing information without requesting a contribution, b) informs the contributor of the requirements for reporting such information under federal law, and c) is enclosed with a pre-addressed envelope when sent by postal mail. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is updated in memo entries filed with the next regularly scheduled report. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2011		257807.24
(b) Cash on Hand at Beginning of Reporting Period	282881.21	
(c) Total Receipts (from Line 19)	102153.98	646825.62
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	385035.19	904632.86
7. Total Disbursements (from Line 31)	88771.34	608369.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	296263.85	296263.85
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	36803.57	233713.85
(ii) Unitemized	65250.41	409244.82
(iii) TOTAL (add Lines 11(a)(i) and (ii)	102053.98	642958.67
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	710.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	102053.98	643669.17
12. Transfers From Affiliated/Other Party Committees	100.00	100.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	3056.45
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	102153.98	646825.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	102153.98	646825.62

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	88771.34	595319.01	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	88771.34	595319.01	
22. Transfers to Affiliated/Other Party Committees.....	0.00	12950.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	100.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	100.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	88771.34	608369.01	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	88771.34	608369.01	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	102053.98	643669.17
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	102053.98	643569.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	88771.34	595319.01
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	3056.45
38. Net Operating Expenditures (subtract Line 37 from Line 36)	88771.34	592262.56

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Dr. Arnold Adicoff

Mailing Address 13952 Collier Rd

City

Grass Valley

State

CA

Zip Code

95945-9340

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Cardiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.23870

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dr. Arnold Adicoff

Mailing Address 13952 Collier Rd

City

Grass Valley

State

CA

Zip Code

95945-9340

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Cardiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	1

Transaction ID: SA11AI.23871

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Gary N. Anderson

Mailing Address 6300 Noland Rd

City

Kansas City

State

MO

Zip Code

64133-4535

FEC ID number of contributing
federal political committee.

C

Name of Employer
UMB

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	1

Transaction ID: SA11AI.23925

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. W. Lee Andrus

Mailing Address 5635 Hole In One Dr

City

Prescott

State

AZ

Zip Code

86301-8109

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.23939

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Less Antman

Mailing Address 19 Gateview Dr

City

Fallbrook

State

CA

Zip Code

92028-9232

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.23948

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mett B. Ausley, Jr.

Mailing Address 3412 Waccamaw Shores Rd

City

Lake Waccamaw

State

NC

Zip Code

28450-9442

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cypress PathologyOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.23980

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)

435.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Richard O. Ayres

Mailing Address 1311 Brentwood Ter

City

Eau Claire

State

WI

Zip Code

54703-1994

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.23987

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Alvin C. Bailey

Mailing Address PO Box 611

City

Auburn

State

AL

Zip Code

36831-0611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24000

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Dwight E. Baker

Mailing Address 68 Perkins Rd

City

Cartersville

State

VA

Zip Code

23027-9747

FEC ID number of contributing
federal political committee.

C

Name of Employer
Energy Operations

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24009

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Jonathan D. Baker

Mailing Address 233 Woodbridge Cir

City

San Mateo

State

CA

Zip Code

94403-4913

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skadden Arps

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24007

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Loren L. Baker

Mailing Address 1801 Rimrock Rd Apt O21

City

Barstow

State

CA

Zip Code

92311-5793

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.24010

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Loren L. Baker

Mailing Address 1801 Rimrock Rd Apt O21

City

Barstow

State

CA

Zip Code

92311-5793

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.24011

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Loren L. Baker

Mailing Address 1801 Rimrock Rd Apt O21

City

Barstow

State

CA

Zip Code

92311-5793

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA11AI.24012

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Loren L. Baker

Mailing Address 1801 Rimrock Rd Apt O21

City

Barstow

State

CA

Zip Code

92311-5793

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA11AI.24013

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Cody Barney

Mailing Address 1723 S Eagleson Rd

City

Boise

State

ID

Zip Code

83705-2714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.24035

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Chris Batchelor

Mailing Address 1276 Creek Bend Rd

City

Jacksonville

State

FL

Zip Code

32259-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer
AT&TOccupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.24044

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Sean Bearly

Mailing Address 132 Spinnaker Way

City

Upland

State

CA

Zip Code

91786-6152

FEC ID number of contributing
federal political committee.

C

Name of Employer
City of Newport BeachOccupation
Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.24059

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Dr. Ricardo Ben-Safed

Mailing Address 118 S 21st St Apt 1420

City

Philadelphia

State

PA

Zip Code

19103-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer
Community Behavioral HealthOccupation
Socialworker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	1

Transaction ID: SA11AI.24090

Amount of Each Receipt this Period

16.57

Contribution

SUBTOTAL of Receipts This Page (optional)

116.57

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Dr. Arthur Bernard Benson, M.D.

Mailing Address 14103 Double Pine Dr

City

Houston

State

TX

Zip Code

77015-1627

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.24091

Amount of Each Receipt this Period

201.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dr. John M. Bills Jr.

Mailing Address 1614 N Reid Hooker

City

Eads

State

TN

Zip Code

38028-7957

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mid South Emergency Speci-
alist

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24116

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Barry B. Bishop

Mailing Address 541 Hamilton St Apt D

City

Costa Mesa

State

CA

Zip Code

92627-8507

FEC ID number of contributing
federal political committee.

C

Name of Employer
AT-Tech

Occupation

Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24122

Amount of Each Receipt this Period

35.00

Contribution

SUBTOTAL of Receipts This Page (optional)

271.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

David E. Blau

Mailing Address 1600 Beacon St Apt 402

City State Zip Code
 Brookline MA 02446-2223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Student

Occupation
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.24139

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Walter E. Block

Mailing Address 6363 Saint Charles Ave

City State Zip Code
 New Orleans LA 70118-6143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Loyola University

Occupation
Economist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.24144

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Rick Bond

Mailing Address 10672 Hillshire Ave

City State Zip Code
 Baton Rouge LA 70810-0714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24163

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Zacharie Boutoille

Mailing Address Box 1791

City

Fort Polk

State

LA

Zip Code

71459

FEC ID number of contributing
federal political committee.

C

Name of Employer
U.S. Army

Occupation

Field Artillery FDC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24181

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Frank J. Bowman

Mailing Address PO Box 6324

City

Laguna Niguel

State

CA

Zip Code

92607-6324

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24183

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Frank J. Bowman

Mailing Address PO Box 6324

City

Laguna Niguel

State

CA

Zip Code

92607-6324

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.24184

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Justin W. Boyd

Mailing Address 1350 Coventry Glen Dr Apt 103

City

Round Lake

State

IL

Zip Code

60073-5833

FEC ID number of contributing
federal political committee.

C

Name of Employer
Automated Technologies Inc.Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	1	1

Transaction ID: SA11AI.24191

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dean Brittain

Mailing Address 21077 Tye Rd

City

Mount Vernon

State

WA

Zip Code

98274-9578

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	1

Transaction ID: SA11AI.24221

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Paul Brochon

Mailing Address 8875 Ridge Ave Apt 33

City

Philadelphia

State

PA

Zip Code

19128-2018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Builders IncOccupation
Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	1

Transaction ID: SA11AI.24223

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. William Brooks

Mailing Address 10814 Pinkney Ln

City

Austin

State

TX

Zip Code

78739-1637

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frontier Associates, LLC

Occupation

Energy Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24234

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Paul A. Brown

Mailing Address 1432 Meadowood Village Dr

City

Fort Worth

State

TX

Zip Code

76120-4701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.24239

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Wallace Howard Burton

Mailing Address 213 S 4th St

City

Festus

State

MO

Zip Code

63028-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24297

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. D. J. Cahill

Mailing Address 23212 Peach Tree Rd

City

Clarksburg

State

MD

Zip Code

20871-9125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24314

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. William Carnes

Mailing Address 251 Cox St

City

Hudson

State

MA

Zip Code

01749-1206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Raytheons

Occupation

Engineer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.24352

Amount of Each Receipt this Period

125.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Vincent Tulli Chambers

Mailing Address 763 Hill View Way

City

Chico

State

CA

Zip Code

95926-4019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Performing Artist

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24390

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Martin H. Coalson

Mailing Address 16760 L Cir

City

Omaha

State

NE

Zip Code

68135-1326

FEC ID number of contributing
federal political committee.

C

Name of Employer
union pacific

Occupation

Marketing Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.24440

Amount of Each Receipt this Period

20.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Admiral Michael C. Colley

Mailing Address 444 Magnolia Dr

City

Gulf Shores

State

AL

Zip Code

36542-4408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24456

Amount of Each Receipt this Period

150.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Admiral Michael C. Colley

Mailing Address 444 Magnolia Dr

City

Gulf Shores

State

AL

Zip Code

36542-4408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.24457

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. William Charles Collins

Mailing Address 505 Mallory Ct

City

El Paso

State

TX

Zip Code

79912-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer
EPIPG/Self

Occupation

Healthcare Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24459

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Martin Q. Dale

Mailing Address 19314 Diamond Park Cir

City

Spring

State

TX

Zip Code

77373-8413

FEC ID number of contributing
federal political committee.

C

Name of Employer
ChevronCorp..

Occupation

Purchasing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24547

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jeremy S. Davis

Mailing Address 7539 Brompton St

City

Houston

State

TX

Zip Code

77025-2267

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4161.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24573

Amount of Each Receipt this Period

650.00

Contribution

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Lynden F. Davis

Mailing Address 555 Pierce St Apt 1305

City

Albany

State

CA

Zip Code

94706-1004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.24572

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Aaron DeCarlo

Mailing Address 9089 Saracen Dr

City

Pikesville

State

MD

Zip Code

21208-2149

FEC ID number of contributing
federal political committee.

C

Name of Employer
United States Air Force

Occupation

Active Duty Enlisted

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24576

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Eric Deister

Mailing Address 3535 N Lakewood Ave # 1

City

Chicago

State

IL

Zip Code

60657-1433

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.24582

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Michael De Mello

Mailing Address 20225 County Road 33

City

Groveland

State

FL

Zip Code

34736-9578

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Financial Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24574

Amount of Each Receipt this Period

200.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Jonathan Demontegre

Mailing Address 1245 Morning View Dr Apt 163

City

Escondido

State

CA

Zip Code

92026-3431

FEC ID number of contributing
federal political committee.

C

Name of Employer
California Air National
Guard

Occupation

Military

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24590

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. John V. DeThomas

Mailing Address 2472 Starlite Ln

City

Boise

State

ID

Zip Code

83712-8500

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.24602

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Patrick J. Dixon

Mailing Address 5002 Sundown St

City

Lago Vista

State

TX

Zip Code

78645-6066

FEC ID number of contributing
federal political committee.

C

Name of Employer
DPAS INC

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24628

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Anthony Dlugos

Mailing Address 11630 Pinewood Trl

City

Chesterland

State

OH

Zip Code

44026-1811

FEC ID number of contributing
federal political committee.

C

Name of Employer
Javitch, Block +Rathbone

Occupation
Collections

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.24630

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Chris Dohogne

Mailing Address 21696 Highway B

City

Lebanon

State

MO

Zip Code

65536-7695

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOD

Occupation
Air Traffic Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.24634

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Michael L. Donahue

Mailing Address 8405 Wyatt Way NE

City

Bainbridge Island

State

WA

Zip Code

98110-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Atty - At - Law

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24636

Amount of Each Receipt this Period

75.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Matthew P. Drew

Mailing Address 801 E Woodcroft Pkwy Apt 802

City

Durham

State

NC

Zip Code

27713-8268

FEC ID number of contributing
federal political committee.

C

Name of Employer
Web Performance, Inc

Occupation

test engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24654

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Michael L. Dudley

Mailing Address 4680 E McCloy Ave

City

Port Clinton

State

OH

Zip Code

43452-4231

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.24674

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Randy Eshelman

Mailing Address 8235 S 107th St

City

La Vista

State

NE

Zip Code

68128-5798

FEC ID number of contributing
federal political committee.

C

Name of Employer
Overlook Systems Technolo-
gies, Inc.

Occupation

Satellite Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24736

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John P. Evans

Mailing Address PO Box 458

City

Indianola

State

WA

Zip Code

98342-0458

FEC ID number of contributing
federal political committee.

C

Name of Employer
Solutions, IQ

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.24740

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Richard Evey

Mailing Address 4150 Trim Tree Dr

City

Morganton

State

NC

Zip Code

28655-8431

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24748

Amount of Each Receipt this Period

45.00

Contribution

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Barry Fagin

Mailing Address 2135 Wickes Rd

City

Colorado Springs

State

CO

Zip Code

80919-4842

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Air Force Academy

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.24751

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Edward G. Fayle

Mailing Address 495 N Main St Pmb 122

City

Lakeport

State

CA

Zip Code

95453-4809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.24767

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Fein

Mailing Address 28 Papworth Ave

City

Metairie

State

LA

Zip Code

70005-4204

FEC ID number of contributing
federal political committee.

C

Name of Employer
W&T Offshore Inc

Occupation
Geologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24770

Amount of Each Receipt this Period

35.00

Contribution

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Heinrich Foltz

Mailing Address RR 26 Box 771D

City

Edinburg

State

TX

Zip Code

78541-8012

FEC ID number of contributing
federal political committee.

C

Name of Employer
UTPA

Occupation
instructor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24811

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Darryl Fontaine

Mailing Address 1 Fontaine Ct

City

Kingsport

State

TN

Zip Code

37660-5748

FEC ID number of contributing
federal political committee.

C

Name of Employer
Darryl Fontaine

Occupation
Anesthesiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.24813

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Randy Gann

Mailing Address 6335 S 72nd East Ave

City

Tulsa

State

OK

Zip Code

74133-1122

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hewlett Packard

Occupation
Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24889

Amount of Each Receipt this Period

75.00

Contribution

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Gordon K. Gardner

Mailing Address 1475 Ashmount Ln

City

Gustine

State

CA

Zip Code

95322-1747

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Morning Star Company

Occupation

Operations/Production

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.24896

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

June R. Genis

Mailing Address 142 Rainbow Dr # 4275

City

Livingston

State

TX

Zip Code

77399-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.24917

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jason B. Geyer

Mailing Address PO Box 346

City

Aromas

State

CA

Zip Code

95004-0346

FEC ID number of contributing
federal political committee.

C

Name of Employer
Driscoll's

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.24932

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Joseph P. Gillotte

Mailing Address 8220 David Hwy

City

Lyons

State

MI

Zip Code

48851-9755

FEC ID number of contributing
federal political committee.

C

Name of Employer
Presort Services, Inc.

Occupation
Bus. Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.24944

Amount of Each Receipt this Period

120.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Joseph P. Gillotte

Mailing Address 8220 David Hwy

City

Lyons

State

MI

Zip Code

48851-9755

FEC ID number of contributing
federal political committee.

C

Name of Employer
Presort Services, Inc.

Occupation
Bus. Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1340.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.24945

Amount of Each Receipt this Period

500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Joseph P. Gillotte

Mailing Address 8220 David Hwy

City

Lyons

State

MI

Zip Code

48851-9755

FEC ID number of contributing
federal political committee.

C

Name of Employer
Presort Services, Inc.

Occupation
Bus. Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.24946

Amount of Each Receipt this Period

120.00

Contribution

SUBTOTAL of Receipts This Page (optional)

740.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

David Gottlieb

Mailing Address 3008 Thomas Jefferson Dr

City

Clairton

State

PA

Zip Code

15025-3264

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.25007

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael E. Graff

Mailing Address 6202 Coachman Dr S

City

Suffolk

State

VA

Zip Code

23435-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverside Medical Group

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25012

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John D. Graham

Mailing Address 21 Marcella St

City

Georgetown

State

DE

Zip Code

19947-9430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pat's Aircraft

Occupation

Electrical Assembler

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.25015

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mark A. Grannis

Mailing Address 7108 Beechwood Dr

City

Chevy Chase

State

MD

Zip Code

20815-5174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25022

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dave Grant

Mailing Address 3776 Laura Leigh Dr

City

Friendswood

State

TX

Zip Code

77546-4157

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Weather Service

Occupation

Electronic Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25024

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

James P. Gray

Mailing Address 2531 Crestview Dr

City

Newport Beach

State

CA

Zip Code

92663-5624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25032

Amount of Each Receipt this Period

35.00

Contribution

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Stephen K. Gray

Mailing Address 2431 Roosevelt Pl Apt 103

City

Gary

State

IN

Zip Code

46404-3391

FEC ID number of contributing
federal political committee.

C

Name of Employer
Student/Tutor

Occupation

Indiana University NW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25031

Amount of Each Receipt this Period

200.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Blair T. Harle

Mailing Address 735 Musago Run

City

Lake Mary

State

FL

Zip Code

32746-2209

FEC ID number of contributing
federal political committee.

C

Name of Employer
RJ Reynolds Tobacco Compa-
ny

Occupation

Senior Division Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25121

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Dr. Bert G. Hassler

Mailing Address 128 Elkins Ave

City

Arcadia

State

CA

Zip Code

91006-1711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.25146

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Dr. Thomas F. Hastings

Mailing Address 10009 Vista Dr

City

Lenexa

State

KS

Zip Code

66220-2637

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Veterinary Pathologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25148

Amount of Each Receipt this Period

70.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ken Heinemann

Mailing Address 3901 S Via Del Ruisenor

City

Green Valley

State

AZ

Zip Code

85622-5017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25175

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. David E. Henkle

Mailing Address 1308 E 12th St Apt 2B

City

Mishawaka

State

IN

Zip Code

46544-5734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.25192

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Brad W. Henry

Mailing Address 3606 41st Ave W

City

Seattle

State

WA

Zip Code

98199-1836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Freeborders

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25194

Amount of Each Receipt this Period

10.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Phillip Michael Herrin

Mailing Address 135 Ray Ridge Rd

City

Albany

State

KY

Zip Code

42602-6936

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.25205

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Phillip Michael Herrin

Mailing Address 135 Ray Ridge Rd

City

Albany

State

KY

Zip Code

42602-6936

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.25206

Amount of Each Receipt this Period

10.00

Contribution

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Regan Philip Hess

Mailing Address 282382 Us Highway 101 Unit Main

City

Port Townsend

State

WA

Zip Code

98368-9396

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25213

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Albert C. Hinkle

Mailing Address 3707 Meridian Ave

City

San Jose

State

CA

Zip Code

95124-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25224

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Albert C. Hinkle

Mailing Address 3707 Meridian Ave

City

San Jose

State

CA

Zip Code

95124-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25225

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Jason Cory Hitt

Mailing Address 100 Osage Way

City

Weldon Spring

State

MO

Zip Code

63304-8104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alter Trading

Occupation

Software Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25236

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Peter C. Hjelmstad

Mailing Address 114 Rodgers Rd

City

Black River

State

NY

Zip Code

13612-2112

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Army

Occupation

Medical Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25240

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John Carl Hjersman

Mailing Address 819 Niobrara Ave

City

Alliance

State

NE

Zip Code

69301-3015

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Ship Mgt, LLC

Occupation

Merchant Mariner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.25242

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

John Carl Hjersman

Mailing Address 819 Niobrara Ave

City

State

Zip Code

Alliance

NE

69301-3015

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Ship Mgt, LLC

Occupation

Merchant Mariner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.25243

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Pamela J. Hoiles

Mailing Address 25 Hillside Rd

City

State

Zip Code

Greenwich

CT

06830-4834

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25257

Amount of Each Receipt this Period

150.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Sam Ed Holloman

Mailing Address PO Box 1690

City

State

Zip Code

Brackettville

TX

78832-1690

FEC ID number of contributing
federal political committee.

C

Name of Employer
Western Sunset

Occupation

Land Developer/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25263

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Kurt G. Horvat

Mailing Address 30 Palisades Ave

City

Bergenfield

State

NJ

Zip Code

07621-2321

FEC ID number of contributing
federal political committee.

C

Name of Employer
Service Excellence

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.25285

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen House

Mailing Address 34340 Auckland Ct

City

Fremont

State

CA

Zip Code

94555-2325

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hughes Aircraft Co.

Occupation
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25294

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ivan Howard

Mailing Address 1303 Cromwell Ct

City

Bel Air

State

MD

Zip Code

21014-2248

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southern States Cooperati-
ve, Inc.

Occupation
Store Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.25300

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 39 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Ms. Barbara J. Howe

Mailing Address 5046 Tar Hill Dr

City

Oxford

State

NC

Zip Code

27565-5416

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	1

Transaction ID: SA11AI.25301

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Lincoln B. Hubbard

Mailing Address 4113 W End Rd

City

Downers Grove

State

IL

Zip Code

60515-2307

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hubbard, Broadbent & Asso-
ciates LTD.

Occupation

Radiological Physicist

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA11AI.25306

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Steven Humphries

Mailing Address PO Box 256

City

Chicopee

State

MA

Zip Code

01021-0256

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Army

Occupation

Active Duty - Enlisted

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA11AI.25320

Amount of Each Receipt this Period

210.00

Contribution

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Stephen L. Hutson

Mailing Address 10031 River Rd

City

South Chesterfield

State

VA

Zip Code

23803-1024

FEC ID number of contributing
federal political committee.

C

Name of Employer
E. I. DuPont

Occupation
millwright

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.25335

Amount of Each Receipt this Period

200.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dr. Lee S. Jackson

Mailing Address 14 Doral Dr

City

Shalimar

State

FL

Zip Code

32579-1612

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Financial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25346

Amount of Each Receipt this Period

40.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Deron Johnson

Mailing Address 1315 Burnett Dr

City

Aurora

State

IL

Zip Code

60502-7051

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hyatt Hotels Corporation

Occupation
Director, Financial Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25396

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. John Brady Jones

Mailing Address 402 Massie St

City

Atlanta

State

TX

Zip Code

75551-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ward Timber Co., Inc.

Occupation
Forester

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25408

Amount of Each Receipt this Period

60.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Leonard J. Karpinski

Mailing Address 2285 SW Creekside Ln

City

McMinnville

State

OR

Zip Code

97128-8948

FEC ID number of contributing
federal political committee.

C

Name of Employer
Leonard Karpinski

Occupation
Principal Designer, NANA Worley Parson

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25450

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Greg John Kerkow

Mailing Address 1941 Francis Ct

City

Shakopee

State

MN

Zip Code

55379-4314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25482

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Richard S. Kerr

Mailing Address 483 Rebecca St

City

Morgantown

State

WV

Zip Code

26505-2246

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	1

Transaction ID: SA11AI.25485

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Brian G. Kiernan

Mailing Address 435 Carpenters Cove Ln

City

Downingtown

State

PA

Zip Code

19335-4541

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interdigital Comm CorpOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	1

Transaction ID: SA11AI.25490

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Larry Kirchmer

Mailing Address 2705 N Shefford St

City

Wichita

State

KS

Zip Code

67205-2032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.25508

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. John A. Kleiner

Mailing Address 46 Greenfield Dr

City

Moraga

State

CA

Zip Code

94556-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.25522

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Christine Kocher

Mailing Address 4770 Saint Joseph Creek Rd Apt 311

City

Lisle

State

IL

Zip Code

60532-1828

FEC ID number of contributing
federal political committee.

C

Name of Employer
StudentOccupation
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	1

Transaction ID: SA11AI.25550

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Karl Kolenich

Mailing Address 115 Island Ave

City

Buckhannon

State

WV

Zip Code

26201-2823

FEC ID number of contributing
federal political committee.

C

Name of Employer
Klie Law OfficesOccupation
Office Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	1

Transaction ID: SA11AI.25556

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Richard Konjarevich

Mailing Address 6095 Trophy Ave

City

Howell

State

MI

Zip Code

48855-8275

FEC ID number of contributing
federal political committee.

C

Name of Employer
GM

Occupation
Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25561

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John R. Kuhn

Mailing Address 42 Church St

City

Charleston

State

SC

Zip Code

29401-2742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kuhn & Kuhn, LLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25584

Amount of Each Receipt this Period

80.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ms. Madeline Kuhn

Mailing Address 47417 Medina Dr W

City

Palm Desert

State

CA

Zip Code

92260-5855

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.25586

Amount of Each Receipt this Period

5.00

Contribution

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Rebecca A. Kurk

Mailing Address 6429 City West Pkwy Apt 4306

City

Eden Prairie

State

MN

Zip Code

55344-3282

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Graphic Design/Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.25594

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Steven M. Kymes

Mailing Address 6821 Wanda Ave

City

Saint Louis

State

MO

Zip Code

63116-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer
Washington University

Occupation

College Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.25596

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ms. Jolie Marie LaChance

Mailing Address 5273 Manassas Ave

City

Las Vegas

State

NV

Zip Code

89122-7009

FEC ID number of contributing
federal political committee.

C

Name of Employer
JT3

Occupation

Electronic Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.25598

Amount of Each Receipt this Period

13.00

Contribution

SUBTOTAL of Receipts This Page (optional)

98.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Bruce K. Lagasse

Mailing Address 1029 Ringneck Way

City

Sparks

State

NV

Zip Code

89441-7815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25602

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ben Lake

Mailing Address 13336 Patito PI Apt 2

City

Dallas

State

TX

Zip Code

75240-5916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wieck Media

Occupation
Web Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25608

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Jonathan Lee

Mailing Address 1103 Saint John Ave

City

Dyersburg

State

TN

Zip Code

38024-3370

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nucor Steel-AR

Occupation
Electrician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25642

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mrs. Andra R. Liemandt

Mailing Address 801 W 5th St Apt 2901

City

Austin

State

TX

Zip Code

78703-5464

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Home Maker

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

15198.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.25684

Amount of Each Receipt this Period

2533.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Joe Liemandt

Mailing Address 801 W 5th St Apt 2901

City

Austin

State

TX

Zip Code

78703-5464

FEC ID number of contributing
federal political committee.

C

Name of Employer
Trilogy

Occupation

Software

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.25685

Amount of Each Receipt this Period

2500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jeff Long

Mailing Address PO Box 35

City

Byron

State

MN

Zip Code

55920-0035

FEC ID number of contributing
federal political committee.

C

Name of Employer
anethetist

Occupation

Mayo Clinic

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.25706

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

5083.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Jason C. Luke

Mailing Address 235 Apollo Beach Blvd # 322

City

Apollo Beach

State

FL

Zip Code

33572-2251

FEC ID number of contributing
federal political committee.

C

Name of Employer
Doctor's Walk-In Clinics
of Tampa Bay.

Occupation

Information Technology Administrator /

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25724

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Vaughan T. Lund

Mailing Address 1503 Brook Valley Ln NE

City

Atlanta

State

GA

Zip Code

30324-3212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cooperative Technologies

Occupation

Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25727

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Kevin J. Lynch

Mailing Address PO Box 711

City

Algona

State

IA

Zip Code

50511-0711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25736

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Patrick T. Madden

Mailing Address 1254 Wimbeldon Blvd

City

Columbus

State

OH

Zip Code

43228-9323

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digital Data Technologies
Inc

Occupation

GIS Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.25740

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Roland W. Maddrey, Jr.

Mailing Address 732 N Main St

City

Mooreville

State

NC

Zip Code

28115-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.25744

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Christopher R. Maden

Mailing Address 78 S School St

City

Portsmouth

State

NH

Zip Code

03801-5250

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metaweb Technologies, Inc.

Occupation

Computer programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25745

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. David Thomas Manley

Mailing Address 2485 Bethany Ln

City

Hinckley

State

OH

Zip Code

44233-9741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.25763

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Aaron R.D. Massey

Mailing Address 360 Iris Ln

City

Highland Park

State

IL

Zip Code

60035-5208

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.25818

Amount of Each Receipt this Period

500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Aaron R.D. Massey

Mailing Address 360 Iris Ln

City

Highland Park

State

IL

Zip Code

60035-5208

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.25819

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 51 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas P. Mathers

Mailing Address 5626 Ruatan St

City

Berwyn Heights

State

MD

Zip Code

20740-4312

FEC ID number of contributing
federal political committee.

C

Name of Employer
NCBFAA Inc.

Occupation
Dircomm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25826

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Robert B. Matthews, Jr.

Mailing Address 3326 Desert Inn Dr

City

Montgomery

State

TX

Zip Code

77356-5350

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horn Murdock Cole

Occupation
CPA/Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.25833

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ms. Juliana MR McCalpin

Mailing Address 312 N Bradley St

City

Mc Kinney

State

TX

Zip Code

75069-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Home Schooling Mom

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25850

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Ms. Juliana MR McCalpin

Mailing Address 312 N Bradley St

City

Mc Kinney

State

TX

Zip Code

75069-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Home Schooling Mom

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25851

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ms. Juliana MR McCalpin

Mailing Address 312 N Bradley St

City

Mc Kinney

State

TX

Zip Code

75069-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Home Schooling Mom

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.27383

Amount of Each Receipt this Period

-50.00

Reverse duplicate charge

C.

Full Name (Last, First, Middle Initial)

Sheldon William McGraw

Mailing Address 611 S Valley St

City

Anaheim

State

CA

Zip Code

92804-3541

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25888

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Michael McGuire

Mailing Address 8023 Wolff St Unit H

City

Westminster

State

CO

Zip Code

80031-4347

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Army

Occupation
Medic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.25889

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Douglas R. McKissack

Mailing Address 7 Bitterroot Ln

City

Savannah

State

GA

Zip Code

31419-9507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gulfstream Aerospace

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.25898

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Douglas R. McKissack

Mailing Address 7 Bitterroot Ln

City

Savannah

State

GA

Zip Code

31419-9507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gulfstream Aerospace

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.25899

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Michael S. McLane

Mailing Address 215 Hancock Ln

City

Athens

State

GA

Zip Code

30605-4741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25900

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Allen R Merriman

Mailing Address 40 Governor Wentworth Rd

City

Amherst

State

NH

Zip Code

03031-3008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.25934

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. William R. Millard

Mailing Address PO Box 9

City

Garrett Park

State

MD

Zip Code

20896-0009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Construction

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.25954

Amount of Each Receipt this Period

206.00

Contribution

SUBTOTAL of Receipts This Page (optional)

306.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Ronald Miller

Mailing Address 6500 E Sopris Creek Rd

City

Snowmass

State

CO

Zip Code

81654-9203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.25970

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Warren L. Miller

Mailing Address PO Box 98

City

Berlin

State

OH

Zip Code

44610-0098

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Postal Service

Occupation
Postal Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25964

Amount of Each Receipt this Period

40.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Dr. Yehia Mishriki, MD

Mailing Address 4752 Belmont Dr

City

Emmaus

State

PA

Zip Code

18049-1227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lehigh Valley Hospital

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25991

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Stephen W. Modzelewski

Mailing Address 1578 River Rd

City

New Hope

State

PA

Zip Code

18938-9267

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Watermark Group

Occupation

Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.25997

Amount of Each Receipt this Period

150.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Moffitt

Mailing Address 2438 Ridgewood Dr

City

West Columbia

State

TX

Zip Code

77486-9685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.25998

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Robert Moore

Mailing Address 398 Plains Rd

City

Lisbon

State

NH

Zip Code

03585-6923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Solid Earth, Inc.

Occupation

Geographer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26014

Amount of Each Receipt this Period

47.00

Contribution

SUBTOTAL of Receipts This Page (optional)

247.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Ronald G. Moore

Mailing Address 55 Broad St Lbby

City

New York

State

NY

Zip Code

10004-2929

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marketing Technologies Gr-
oup

Occupation

Computer Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26007

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Eduard E. Morf

Mailing Address 908 14th St

City

Hermosa Beach

State

CA

Zip Code

90254-4011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unitrans Int'l Corp.

Occupation

Exec. VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.26022

Amount of Each Receipt this Period

200.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. William E. Morris

Mailing Address 2124 Brandywood Dr

City

Wilmington

State

DE

Zip Code

19810-2435

FEC ID number of contributing
federal political committee.

C

Name of Employer
DuPont Company

Occupation

Chemical Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26041

Amount of Each Receipt this Period

40.00

Contribution

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Chuck Moulton

Mailing Address 4220 Hunt Club Cir Apt 811

City

Fairfax

State

VA

Zip Code

22033-4040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Villanova Law School

Occupation
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26053

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

George W. Mowbray

Mailing Address 3649 Burton Ln

City

Lake Charles

State

LA

Zip Code

70605-1025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lake Charles Pilots, Inc.

Occupation
River Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26057

Amount of Each Receipt this Period

150.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ms. Wanda Myers

Mailing Address 5103 Carew St

City

Houston

State

TX

Zip Code

77096-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unemployed

Occupation
Domestic Caregiver/Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.26083

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Michael C. Neviaseer

Mailing Address 4005 Clearwater Ln

City

Jacksonville

State

FL

Zip Code

32223-2036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Investment Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	1

Transaction ID: SA11AI.26114

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Byron K. Nichols

Mailing Address 9000 Holly St

City

Kansas City

State

MO

Zip Code

64114-3528

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Gov't

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	1	1

Transaction ID: SA11AI.26119

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Peter A. Nilsen

Mailing Address 1601 S Fort Ave Apt Ee

City

Springfield

State

MO

Zip Code

65807-8424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	1

Transaction ID: SA11AI.26131

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Sean T. O'Toole

Mailing Address 3425 Gladstone Blvd

City

Kansas City

State

MO

Zip Code

64123-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26191

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Steven R. Osborne

Mailing Address 412 River Oaks Dr

City

Luling

State

LA

Zip Code

70070-2144

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Dow Chemical Company

Occupation

Chemical Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26185

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Richard B. Patterson

Mailing Address 1790 Allenby Grn

City

Germantown

State

TN

Zip Code

38139-3238

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shelby County Schools

Occupation

School Bus Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.26224

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Arjen Peirce

Mailing Address 3001 Coleridge Rd

City

Cleveland

State

OH

Zip Code

44118-3526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Calix

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26243

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph H. Perry

Mailing Address 7314 Daisy St

City

Columbus

State

GA

Zip Code

31904-2606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbus State Univ.

Occupation
System Support Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26252

Amount of Each Receipt this Period

75.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Jeff D. Pizanti

Mailing Address 6915 N Calispel St

City

Spokane

State

WA

Zip Code

99208-3929

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Navy

Occupation
Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26291

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

David Pizon

Mailing Address 858 Vine Ave

City

Oshkosh

State

WI

Zip Code

54901-3666

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

IT Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.26293

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Chad Polenz

Mailing Address 225 Schoolhouse Rd # 1

City

Albany

State

NY

Zip Code

12203-5957

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Navy

Occupation

E4

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26309

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ms. Pamela P. Potter

Mailing Address 538 Spring Place Rd NE

City

White

State

GA

Zip Code

30184-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26324

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1535.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Earl Prochaska

Mailing Address 10 Laurretta Dr

City

Highland

State

NY

Zip Code

12528-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	1	/	2	0	1	1

Transaction ID: SA11AI.26345

Amount of Each Receipt this Period

62.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Daniel E. Proctor

Mailing Address 5401 Verner Dr

City

La Palma

State

CA

Zip Code

90623-2043

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRI WEST LTD.Occupation
Wholesale

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	1

Transaction ID: SA11AI.26348

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Estate of Joseph Reitano

Mailing Address C/of William J. Gold, Esq.
21 Hardwick Rd

City

Hardwick

State

NJ

Zip Code

07825-3106

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	1	1

Transaction ID: SA11AI.26404

Amount of Each Receipt this Period

7000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

7312.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Jonathan W. Robbins

Mailing Address 1 Tilbury Ct

City

Chapel Hill

State

NC

Zip Code

27517-8972

FEC ID number of contributing
federal political committee.

C

Name of Employer
NVIDIA Corporation

Occupation

Sr. Software Engineer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 1 1

Transaction ID: SA11AI.26450

Amount of Each Receipt this Period

200.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Jonathan W. Robbins

Mailing Address 1 Tilbury Ct

City

Chapel Hill

State

NC

Zip Code

27517-8972

FEC ID number of contributing
federal political committee.

C

Name of Employer
NVIDIA Corporation

Occupation

Sr. Software Engineer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.26451

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Dr. Gil Robinson

Mailing Address 5150 Broadway St # 610

City

San Antonio

State

TX

Zip Code

78209-5710

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

PHYSICIAN

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.26465

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Thomas Rose

Mailing Address 1503 Morgan Rd
PO Box 518

City Benson State NC Zip Code 27504-0518

FEC ID number of contributing
federal political committee.

C

Name of Employer
LJ ROGERS TRUCKING / CRES-
TMARK ENTERPR

Occupation
transportation broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26496

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dr. Kelley L. Ross, II

Mailing Address 13403 Weddington St

City Sherman Oaks State CA Zip Code 91401-5928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.26501

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Richard S. Roth

Mailing Address 984 Bloomfield Ave # A

City West Caldwell State NJ Zip Code 07006-7108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.26509

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Ms. Susan S. Ruch

Mailing Address 5 Cuesta Ln

City

Santa Fe

State

NM

Zip Code

87508-8331

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Ranching, Real Estate Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26515

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ms. Emily H. Salvette

Mailing Address 2016 Devonshire Rd

City

Ann Arbor

State

MI

Zip Code

48104-4058

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of MI

Occupation

Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.26556

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Diane Sawyer

Mailing Address 19 Gateview Dr

City

Fallbrook

State

CA

Zip Code

92028-9232

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26579

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Charles Schmid

Mailing Address 4931 Nettleton Road

City

Medina

State

OH

Zip Code

44256-5967

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.26601

Amount of Each Receipt this Period

200.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Steven Schoch

Mailing Address 974 Bluebonnet Dr

City

Sunnyvale

State

CA

Zip Code

94086-6756

FEC ID number of contributing
federal political committee.

C

Name of Employer
StarNet Communications Co-
rp

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26613

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. John R. Seydel

Mailing Address 1027 Peachtree Battle Ave NW

City

Atlanta

State

GA

Zip Code

30327-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.26687

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

John Shelton

Mailing Address 107 Druid Hills Rd

City

Arkadelphia

State

AR

Zip Code

71923-3700

FEC ID number of contributing
federal political committee.

C

Name of Employer
Danfoss Scroll Technologi-
esOccupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	3	/	2	0	1	1

Transaction ID: SA11AI.26714

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dr. Thomas J. Shepard

Mailing Address 3378 Black Willow Trl

City

Deland

State

FL

Zip Code

32724-3431

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	1

Transaction ID: SA11AI.26717

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. John Shuey

Mailing Address 4457 Young Dr

City

Carrollton

State

TX

Zip Code

75010-1145

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	1

Transaction ID: SA11AI.26724

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Robert Shuford

Mailing Address 6 Whartons Way

City

Hampton

State

VA

Zip Code

23669-1094

FEC ID number of contributing
federal political committee.

C

Name of Employer
Old Point National Bank

Occupation

Information Systems banki

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26726

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dr. Robban A. Sica, M.D.

Mailing Address 37 Lakewood Dr

City

Trumbull

State

CT

Zip Code

06611-2446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Center for the Healing Ar-
t, PC

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26733

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey S. Skinner

Mailing Address PO Box 7007

City

Northridge

State

CA

Zip Code

91327-7007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prism Management Company,
Inc.

Occupation

Consulting Actuary/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26758

Amount of Each Receipt this Period

75.00

Contribution

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Lloyd E. Smith

Mailing Address 21 Franklin Ave

City

Oswego

State

NY

Zip Code

13126-1755

FEC ID number of contributing
federal political committee.

C

Name of Employer
HYCO Tunnel & Sewer Co.

Occupation

Land Speculator

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	1

Transaction ID: SA11AI.26772

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. John R. Sparduto

Mailing Address PO Box 469114

City

Escondido

State

CA

Zip Code

92046-9114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Warren Properties

Occupation

Bookkeeper

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	1

Transaction ID: SA11AI.26812

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. John Speicher

Mailing Address 137 Rossi Rd

City

Geyserville

State

CA

Zip Code

95441-9687

FEC ID number of contributing
federal political committee.

C

Name of Employer
Versatron Corporation

Occupation

Engineer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	1

Transaction ID: SA11AI.26822

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Scott Spencer

Mailing Address 424 Whitridge Ave

City

Baltimore

State

MD

Zip Code

21218-4435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Johns Hopkins University

Occupation

Programmer/Analyst

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26825

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dr. Cisse Spragins

Mailing Address 3425 Gladstone Blvd

City

Kansas City

State

MO

Zip Code

64123-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rockwell Lab Ltd.

Occupation

Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.26831

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Dr. David Lawrence Standley

Mailing Address 563 Hampshire Rd Apt 165G

City

Westlake Village

State

CA

Zip Code

91361-2204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Altasens. Inc

Occupation

Chief Scientist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.26841

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

385.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Joseph Stanik

Mailing Address 516 Bay Hills Dr

City

Arnold

State

MD

Zip Code

21012-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baltimore City Public Sch-
ool System

Occupation

Retired Naval Officer/High School Teach

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	1

Transaction ID: SA11AI.26845

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Aaron Starr

Mailing Address 4048 Tucson St

City

Simi Valley

State

CA

Zip Code

93063-1144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Haas Automation, Inc.

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.26852

Amount of Each Receipt this Period

10.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Chase Dewey Stephens

Mailing Address 2093 Butler Way NW

City

Atlanta

State

GA

Zip Code

30318-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer
ICE

Occupation

Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	1

Transaction ID: SA11AI.26869

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Dr. Robyn Sterner

Mailing Address 3 Craft Farm Dr

City

Bridgewater

State

NJ

Zip Code

08807-5586

FEC ID number of contributing
federal political committee.

C

Name of Employer
Johnson & Johnson

Occupation

Pharmaceutical R + D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.26879

Amount of Each Receipt this Period

500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Timothy J. Swenson

Mailing Address 210 Vine St
PO Box 146

City

Arnegard

State

ND

Zip Code

58835-0146

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wilmington Lutheran Church

Occupation

Pastor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26930

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Randy Szabla

Mailing Address 32034 W 13 Mile Rd

City

Farmington Hills

State

MI

Zip Code

48334-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wayne State University

Occupation

Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26933

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)

635.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Dr. John M. Taylor, MD

Mailing Address 145 Church St

City

Fair Haven

State

NJ

Zip Code

07704-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Samra Group

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.26953

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. William M. Templeton

Mailing Address 469 10th St NW Apt 3

City

Atlanta

State

GA

Zip Code

30318-5786

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.26957

Amount of Each Receipt this Period

200.00

Contribution

C.

Full Name (Last, First, Middle Initial)

J. C. Terrell

Mailing Address 6351 Lake Lucerne Dr

City

San Diego

State

CA

Zip Code

92119-3035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.26958

Amount of Each Receipt this Period

200.00

Contribution

SUBTOTAL of Receipts This Page (optional)

485.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Charles D. Test

Mailing Address 2710 2nd Ave S

City

Minneapolis

State

MN

Zip Code

55408-1710

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Landlord

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.26960

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. John Thompson

Mailing Address 9308 Russell Ave S

City

Minneapolis

State

MN

Zip Code

55431-2430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.26983

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Dr. Richard H. Timberlake

Mailing Address 220 Deerfield Rd

City

Bogart

State

GA

Zip Code

30622-1739

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.27001

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Dr. Richard H. Timberlake

Mailing Address 220 Deerfield Rd

City

Bogart

State

GA

Zip Code

30622-1739

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA11AI.27003

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. James L. Tobin

Mailing Address 1822 Home Ave

City

Berwyn

State

IL

Zip Code

60402-3080

FEC ID number of contributing
federal political committee.

C

Name of Employer
ITEF

Occupation

Education

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	1

Transaction ID: SA11AI.27018

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Aubrey Tolson

Mailing Address 431 Quane Ave

City

Spring Hill

State

FL

Zip Code

34609-0214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA11AI.27019

Amount of Each Receipt this Period

200.00

Contribution

SUBTOTAL of Receipts This Page (optional)

335.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Roy C. Turnbull

Mailing Address 4912 Royal Cove Dr

City

Shelby Township

State

MI

Zip Code

48316-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRW Vehicle Safety Systems

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.27068

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. James S. Voris

Mailing Address 20 Warren Manor Ct

City

Cockeysville

State

MD

Zip Code

21030-2741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aether Systems, Inc

Occupation
Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.27142

Amount of Each Receipt this Period

40.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Arch Wakefield

Mailing Address 3047 Point Clear Dr

City

Tega Cay

State

SC

Zip Code

29708-8542

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.27149

Amount of Each Receipt this Period

75.00

Contribution

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Arch Wakefield

Mailing Address 3047 Point Clear Dr

City

Tega Cay

State

SC

Zip Code

29708-8542

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.27150

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Arch Wakefield

Mailing Address 3047 Point Clear Dr

City

Tega Cay

State

SC

Zip Code

29708-8542

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.27382

Amount of Each Receipt this Period

-85.00

Reverse duplicate charge

C.

Full Name (Last, First, Middle Initial)

Richard Waller

Mailing Address 346 Pecan Hollow Cir

City

Anna

State

TX

Zip Code

75409-6289

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dell Inc

Occupation
Solutions Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.27165

Amount of Each Receipt this Period

35.00

Contribution

SUBTOTAL of Receipts This Page (optional)

35.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Captain Anthony D. Ward

Mailing Address 3262 NE 88th Ave

City

Portland

State

OR

Zip Code

97220-5253

FEC ID number of contributing
federal political committee.

C

Name of Employer
Multnowah County

Occupation
Librarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.27173

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Brian Keith Waters

Mailing Address 101 W 6th St

City

Bayonne

State

NJ

Zip Code

07002-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer
IMTT-Pipeline

Occupation
Pipeline Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.27181

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jeffrey J. Weston

Mailing Address 1255 NW 9th Ave Apt 301

City

Portland

State

OR

Zip Code

97209-2887

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eleven Wireless

Occupation
SW Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.27213

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Will W. White

Mailing Address 3220 SE Hansel Ave

City

Arcadia

State

FL

Zip Code

34266-3143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	1

Transaction ID: SA11AI.27225

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. George R. Whitfield

Mailing Address 45107 Tarney Wood Dr

City

Portsmouth

State

VA

Zip Code

23703-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
Halcyon Search Internatio-
nal

Occupation

Executive Search International

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.27231

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Beverly J. Wilcox

Mailing Address PO Box 153

City

Wentworth

State

NC

Zip Code

27375-0153

FEC ID number of contributing
federal political committee.

C

Name of Employer
Government

Occupation

Taxpayer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	1

Transaction ID: SA11AI.27239

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

John D. Williams

Mailing Address 3 Clover Leaf Ct

City

Savoy

State

IL

Zip Code

61874-9759

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.27244

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael J. Williams

Mailing Address 2134 Augusta Dr

City

Houston

State

TX

Zip Code

77057-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
CotractorOccupation
Mechanical Engr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	1

Transaction ID: SA11AI.27245

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Charles W. Wilson

Mailing Address PO Box 454

City

Red Oak

State

IA

Zip Code

51566-0454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	1

Transaction ID: SA11AI.27264

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 114

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Bernhard Wolf

Mailing Address 513 W 7th St

City

Plainview

State

TX

Zip Code

79072-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.27290

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Bernhard Wolf

Mailing Address 513 W 7th St

City

Plainview

State

TX

Zip Code

79072-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.27291

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ms Elizabeth G Wright

Mailing Address 4850 Eisenhower Ave Unit 120

City

Alexandria

State

VA

Zip Code

22304-7307

FEC ID number of contributing
federal political committee.

C

Name of Employer
United States Patent and
Trademark Off

Occupation
Patent Examiner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.52

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.27314

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 114

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. David A. Young

Mailing Address 2825 S Washington Ave Unit 657

City

Titusville

State

FL

Zip Code

32780-5060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boeing

Occupation

Technical Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	1	/	2	0	1	1

Transaction ID: SA11AI.27331

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mr. Alexander Yuill-Thornton, II

Mailing Address 4326 Parker Hill Rd

City

Santa Rosa

State

CA

Zip Code

95404-1320

FEC ID number of contributing
federal political committee.

C

Name of Employer
Solstice Company

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	1

Transaction ID: SA11AI.27339

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mr. Gary Zander

Mailing Address 102 Back Bone Hill Rd

City

Clarksburg

State

NJ

Zip Code

08510-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer
IFF

Occupation

scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	1

Transaction ID: SA11AI.27343

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

36803.57

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 114

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Illinois Libertarian Party

Mailing Address PO Box 1605

City

Chicago

State

IL

Zip Code

60690-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

Transaction ID: SA12.27377

Amount of Each Receipt this Period

100.00

Transfer from Affiliated
Party Committee

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

100.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 85 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

American National Insurance Co.

Mailing Address Pension Administration - P7283
PO Box 1830

City Galveston State TX Zip Code 77553-1830

Purpose of Disbursement
LP 401k Management Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27412

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)

American National Insurance Co.

Mailing Address Pension Administration - P7283
PO Box 1830

City Galveston State TX Zip Code 77553-1830

Purpose of Disbursement
LP and Employee 401k Contributions

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27413

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

1537.40

C.

Full Name (Last, First, Middle Initial)

B & B Duplicators

Mailing Address 818 18th Street NW LL15

City Washington State DC Zip Code 20006-0000

Purpose of Disbursement
Non Candidate Party Printing Service

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27417

Date of Disbursement

06 / 16 / 2011

Amount of Each Disbursement this Period

445.20

SUBTOTAL of Disbursements This Page (optional)

2382.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 86 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Robert C. Benedict

Mailing Address 2400 Virginia Ave NW
Apt C1125

City Washington State DC Zip Code 20037-2661

Purpose of Disbursement
Employee Net Pay

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27418

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

1991.46

B.

Full Name (Last, First, Middle Initial)

Robert C. Benedict

Mailing Address 2400 Virginia Ave NW
Apt C1125

City Washington State DC Zip Code 20037-2661

Purpose of Disbursement
Employee Net Pay

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27419

Date of Disbursement

06 / 23 / 2011

Amount of Each Disbursement this Period

1991.46

C.

Full Name (Last, First, Middle Initial)

BentleyForbes Watergate LLC

Mailing Address PO Box 373378

City Cleveland State OH Zip Code 44193-3378

Purpose of Disbursement
Office Rent, Tax, Maint & Utilities

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27420

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

10846.77

SUBTOTAL of Disbursements This Page (optional)

14829.69

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Bigeye Direct, Inc.

Mailing Address PO Box 710865

City
Oak HillState
VAZip Code
20171-0865Purpose of Disbursement
Non Candidate Party Mailing Service

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27421

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	1

Amount of Each Disbursement this Period

2818.31

B.

Full Name (Last, First, Middle Initial)

Bigeye Direct, Inc.

Mailing Address PO Box 710865

City
Oak HillState
VAZip Code
20171-0865Purpose of Disbursement
Non Candidate Party Mailing Service

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27422

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	1

Amount of Each Disbursement this Period

1226.65

C.

Full Name (Last, First, Middle Initial)

Bigeye Direct, Inc.

Mailing Address PO Box 710865

City
Oak HillState
VAZip Code
20171-0865Purpose of Disbursement
Non Candidate Party Mailing Service

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27423

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Amount of Each Disbursement this Period

4900.53

SUBTOTAL of Disbursements This Page (optional)

8945.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 88 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Broadway Premium Funding	Transaction ID: SB21B.27424 Date of Disbursement																				
Mailing Address PO Box 66468	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	1		2	0	1	1												
City Chicago State IL Zip Code 60666-0468	Amount of Each Disbursement this Period																				
Purpose of Disbursement D&O Insurance Candidate Name	<table border="1"> <tr> <td colspan="10">811.64</td> </tr> </table>	811.64																			
811.64																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.27425 Date of Disbursement																				
Mailing Address PO Box 3005	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	9		2	0	1	1												
City Southeastern State PA Zip Code 19398-3005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Internet and Cable Candidate Name	<table border="1"> <tr> <td colspan="10">73.94</td> </tr> </table>	73.94																			
73.94																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions	Transaction ID: SB21B.27426 Date of Disbursement																				
Mailing Address 21205 Ridgetop Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	6		2	0	1	1												
City Sterling State VA Zip Code 20166-6501	Amount of Each Disbursement this Period																				
Purpose of Disbursement Copier Maint and Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">106.27</td> </tr> </table>	106.27																			
106.27																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

991.85

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 89 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions	Transaction ID: SB21B.27427 Date of Disbursement																				
Mailing Address 21205 Ridgetop Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	1	1												
City Sterling State VA Zip Code 20166-6501	Amount of Each Disbursement this Period																				
Purpose of Disbursement Copier Maint and Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">132.29</td> </tr> </table>	132.29																			
132.29																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue	Transaction ID: SB21B.27428 Date of Disbursement																				
Mailing Address 941 North Capitol St, NE 6th Flr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	7		2	0	1	1												
City Washington State DC Zip Code 20002-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement DC - Admin. Funding Assessment Candidate Name	<table border="1"> <tr> <td colspan="10">2.26</td> </tr> </table>	2.26																			
2.26																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue	Transaction ID: SB21B.27429 Date of Disbursement																				
Mailing Address 941 North Capitol St, NE 6th Flr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	7		2	0	1	1												
City Washington State DC Zip Code 20002-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement DC - Unemployment Company Candidate Name	<table border="1"> <tr> <td colspan="10">18.15</td> </tr> </table>	18.15																			
18.15																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

152.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City
Washington

State
DC

Zip Code
20002-0000

Purpose of Disbursement
DC - Withholding

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27430

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

312.68

B.

Full Name (Last, First, Middle Initial)

DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City
Washington

State
DC

Zip Code
20002-0000

Purpose of Disbursement
DC - Admin. Funding Assessment

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27431

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

2.27

C.

Full Name (Last, First, Middle Initial)

DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City
Washington

State
DC

Zip Code
20002-0000

Purpose of Disbursement
DC - Unemployment Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27432

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

18.15

SUBTOTAL of Disbursements This Page (optional)

333.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City
Washington

State
DC

Zip Code
20002-0000

Purpose of Disbursement
DC - Withholding

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27433

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

312.68

B.

Full Name (Last, First, Middle Initial)

De Lage Landen Financial

Mailing Address PO Box 41602

City
Philadelphia

State
PA

Zip Code
19101-1602

Purpose of Disbursement
Copier Lease

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27434

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

495.12

C.

Full Name (Last, First, Middle Initial)

Mr. Arthur N. DiBianca

Mailing Address 619 Friar Tuck Ln

City
Austin

State
TX

Zip Code
78704-5609

Purpose of Disbursement
Administrative Support Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27435

Date of Disbursement

06 / 14 / 2011

Amount of Each Disbursement this Period

1680.00

SUBTOTAL of Disbursements This Page (optional)

2487.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Arthur N. DiBianca

Mailing Address 619 Friar Tuck Ln

City
Austin

State
TX

Zip Code
78704-5609

Purpose of Disbursement
Administrative Support Services

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27436

Date of Disbursement

06 / 27 / 2011

Amount of Each Disbursement this Period

1680.00

B.

Full Name (Last, First, Middle Initial)

Mr. Arthur N. DiBianca

Mailing Address 619 Friar Tuck Ln

City
Austin

State
TX

Zip Code
78704-5609

Purpose of Disbursement
Administrative Support Services

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27437

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

252.00

C.

Full Name (Last, First, Middle Initial)

Kelly R. Dirkes

Mailing Address 6200 Wilson Blvd. #919

City
Falls Church

State
VA

Zip Code
22044-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27438

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

952.51

SUBTOTAL of Disbursements This Page (optional)

2884.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Kelly R. Dirkes

Mailing Address 6200 Wilson Blvd. #919

City Falls Church State VA Zip Code 22044-0000

Purpose of Disbursement

Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27439

Date of Disbursement

06 / 23 / 2011

Amount of Each Disbursement this Period

952.51

B.

Full Name (Last, First, Middle Initial)

Dominick J. Dunbar

Mailing Address 470 Raven Rd

City Stafford State VA Zip Code 22554-4006

Purpose of Disbursement

Employee Net Pay

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27440

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

525.13

C.

Full Name (Last, First, Middle Initial)

Dominick J. Dunbar

Mailing Address 470 Raven Rd

City Stafford State VA Zip Code 22554-4006

Purpose of Disbursement

Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27441

Date of Disbursement

06 / 23 / 2011

Amount of Each Disbursement this Period

404.18

SUBTOTAL of Disbursements This Page (optional)

1881.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Paula Edwards

Mailing Address 1200 G Street, N.W. Suite 800

City
Washington

State
DC

Zip Code
20005-0000

Purpose of Disbursement
Fec Filing and Amendments for 2011

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27442

Date of Disbursement

06 / 01 / 2011

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Federal Unemployment

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27443

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

9.08

C.

Full Name (Last, First, Middle Initial)

Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. Louis

State
MO

Zip Code
63197-0030

Purpose of Disbursement
Federal Withholding

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27444

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

1359.00

SUBTOTAL of Disbursements This Page (optional)

2868.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Medicare Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27445

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

146.43

B. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Medicare Employee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27446

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

146.43

C. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Social Security Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27447

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

626.12

SUBTOTAL of Disbursements This Page (optional)

918.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 96 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Social Security Employee

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.27448

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

424.14

B. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Federal Unemployment

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.27449

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

9.08

C. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Federal Withholding

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.27450

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

1476.00

SUBTOTAL of Disbursements This Page (optional)

1909.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 97 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Medicare Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.27451

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

151.75

B. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Medicare Employee

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.27452

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

151.75

C. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Social Security Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.27453

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

648.83

SUBTOTAL of Disbursements This Page (optional)

952.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 98 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Social Security Employee

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27454

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

439.53

B. Full Name (Last, First, Middle Initial)
Cheryl Forde

Mailing Address PO Box 56507

City State Zip Code
Philadelphia PA 19111-6507

Purpose of Disbursement
Petitioning Expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27455

Date of Disbursement

06 / 06 / 2011

Amount of Each Disbursement this Period

52.71

C. Full Name (Last, First, Middle Initial)
FP Mailing Solutions

Mailing Address PO Box 4510

City State Zip Code
Carol Stream IL 60197-4510

Purpose of Disbursement
Postage & Meter Resets

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27456

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

3492.24

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 99 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Frye & Wolcott, CPAs

Mailing Address 9161 Liberia Avenue, Suite 304

City
ManassasState
VAZip Code
20110-0000Purpose of Disbursement
2010 Audit Deposit

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27458

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	1

Amount of Each Disbursement this Period

6500.00

B.

Full Name (Last, First, Middle Initial)

Great American Leasing

Mailing Address PO Box 660831

City
DallasState
TXZip Code
75266-0831Purpose of Disbursement
Post Meter Lease Agreement

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27459

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	1

Amount of Each Disbursement this Period

160.99

C.

Full Name (Last, First, Middle Initial)

Casey T. Hansen

Mailing Address 1445 Ogden St. NW
Apt #212City
WashingtonState
DCZip Code
20010-0000Purpose of Disbursement
Employee Net Pay

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27460

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	1

Amount of Each Disbursement this Period

1049.98

SUBTOTAL of Disbursements This Page (optional)

7710.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 100 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Casey T. Hansen</p> <p>Mailing Address 1445 Ogden St. NW Apt #212</p> <p>City Washington State DC Zip Code 20010-0000</p> <p>Purpose of Disbursement Employee Net Pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27461</p> <p>Date of Disbursement 06 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 1049.97</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Joe Ragan's</p> <p>Mailing Address PO Box 125</p> <p>City Soringfield State VA Zip Code 22150-0125</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27464</p> <p>Date of Disbursement 06 / 16 / 2011</p> <p>Amount of Each Disbursement this Period 391.66</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Joe Ragan's</p> <p>Mailing Address PO Box 125</p> <p>City Soringfield State VA Zip Code 22150-0125</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.27465</p> <p>Date of Disbursement 06 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 142.63</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

1584.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 101 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Robert Johnston

Mailing Address PO Box 7742

City
Essex

State
MD

Zip Code
21221-0742

Purpose of Disbursement
Tele-fundraising Consulting

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27466

Date of Disbursement

06 / 06 / 2011

Amount of Each Disbursement this Period

1570.00

B.

Full Name (Last, First, Middle Initial)

Robert Johnston

Mailing Address PO Box 7742

City
Essex

State
MD

Zip Code
21221-0742

Purpose of Disbursement
Tele-fundraising Consulting

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27467

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

1580.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert Kraus

Mailing Address 2500 N Van Dorn St Apt PH08

City
Alexandria

State
VA

Zip Code
22302-1629

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27468

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

1502.40

SUBTOTAL of Disbursements This Page (optional)

4652.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 102 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Mr. Robert Kraus

Transaction ID: SB21B.27469

Date of Disbursement

06 / 23 / 2011

Mailing Address 2500 N Van Dorn St Apt PH08

City Alexandria State VA Zip Code 22302-1629

Amount of Each Disbursement this Period

1800.15

Purpose of Disbursement

Employee Net Pay

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Legal Printers, LLC

Transaction ID: SB21B.27471

Date of Disbursement

06 / 09 / 2011

Mailing Address 5505 Conn. Ave NW #307

City Washington State DC Zip Code 20015-0000

Amount of Each Disbursement this Period

2320.49

Purpose of Disbursement

Legal Expenses

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Nigel A. Lyons

Transaction ID: SB21B.27472

Date of Disbursement

06 / 08 / 2011

Mailing Address 1219 Park Rd NW Apt B

City Washington State DC Zip Code 20010-2096

Amount of Each Disbursement this Period

1055.03

Purpose of Disbursement

Employee Net Pay

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5175.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Nigel A. Lyons

Mailing Address 1219 Park Rd NW Apt B

City
Washington

State
DC

Zip Code
20010-2096

Purpose of Disbursement
Employee Net Pay

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27473

Date of Disbursement

06 / 23 / 2011

Amount of Each Disbursement this Period

1055.04

B.

Full Name (Last, First, Middle Initial)

Merchant Services

Mailing Address 890 Mountain Ave

City
New Providence

State
NJ

Zip Code
07974-0000

Purpose of Disbursement
Merchant Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27474

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

643.23

C.

Full Name (Last, First, Middle Initial)

PAETEC - US LEC Corp.

Mailing Address PO Box 1283

City
Buffalo

State
NY

Zip Code
14240-1283

Purpose of Disbursement
Phone and Data Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27475

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

1193.41

SUBTOTAL of Disbursements This Page (optional)

2891.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

PayPal Merchant Services

Mailing Address 2211 N. First St.

City
San Jose

State
CA

Zip Code
95131-0000

Purpose of Disbursement

Merch Processing Fee

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27476

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

698.97

B.

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 2600 Virginia Ave NW

City
Washington

State
DC

Zip Code
20037-0000

Purpose of Disbursement

Bank Service Charge

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27478

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

97.99

C.

Full Name (Last, First, Middle Initial)

PNC Visa Card

Mailing Address P.O. Box 856176

City
Louisville

State
KY

Zip Code
40285-6176

Purpose of Disbursement

PNC Visa Card Payment-See Attached Memos

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.27479

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

7138.34

SUBTOTAL of Disbursements This Page (optional)

7935.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 105 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Amazon.com	Transaction ID: SB21B.27479.1 Date of Disbursement																				
Mailing Address 1200 12th Avenue South #1200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	1	1												
City State Zip Code Seattle WA 98144-2734	Amount of Each Disbursement this Period																				
Purpose of Disbursement Video Camera Equipment	<table border="1"> <tr> <td>387.27</td> </tr> </table>	387.27																			
387.27																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) AT&T - Mobility	Transaction ID: SB21B.27479.2 Date of Disbursement																				
Mailing Address PO Box 6463	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	1	1												
City State Zip Code Carol Stream IL 60197-6463	Amount of Each Disbursement this Period																				
Purpose of Disbursement Cell Phone and Data Services	<table border="1"> <tr> <td>83.50</td> </tr> </table>	83.50																			
83.50																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) Bally's Hotel and Casino	Transaction ID: SB21B.27479.3 Date of Disbursement																				
Mailing Address 3645 Las Vegas Blvd S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	1	1												
City State Zip Code Las Vegas NV 89109-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Staff Travel - Hotel	<table border="1"> <tr> <td>217.28</td> </tr> </table>	217.28																			
217.28																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

ClearSky24, Inc.

Mailing Address 4440 Lawnview Ave.

City
Dallas

State
TX

Zip Code
75227-0000

Purpose of Disbursement
LP Party T-Shirts

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27479.4

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

588.71

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Corporate & Leisure

Mailing Address 2700 W. Cyprus Creek Road
Suite D-105

City
Ft Lauderdale

State
FL

Zip Code
33309-0000

Purpose of Disbursement
Staff Travel-Air

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27479.6

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Facebook, Inc.

Mailing Address 1601 S. California Ave

City
Palo Alto

State
CA

Zip Code
94304-0000

Purpose of Disbursement
Facebook Widget Ad

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27479.10

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

366.95

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 107 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Lexis-Nexis t/a Accurint

Mailing Address P.O. Box 538358

City
Atlanta

State
GA

Zip Code
30353-8358

Purpose of Disbursement
Address and Phone Verification
Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27479.11

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

437.52

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Lyris Tech - Sparklist

Mailing Address PO Box 49023

City
San Jose

State
CA

Zip Code
95161-9023

Purpose of Disbursement
Email Marketing
Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27479.12

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address 2500 Virginia Ave NW

City
Washington

State
DC

Zip Code
20037-0000

Purpose of Disbursement
Postage
Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.27479.14

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

322.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 108 / 114

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Rackspace US Inc.

Mailing Address 9725 Datapoint Dr. #100

City San Antonio State TX Zip Code 78229-0000

Purpose of Disbursement
Website Hosting Service

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27479.15

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

649.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SoftLayer Technologies, Inc.

Mailing Address 4849 Alpha Road,

City Dallas State TX Zip Code 75244-0000

Purpose of Disbursement
Email Server Hosting Expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27479.17

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

574.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

USAirways

Mailing Address 2345 Crystal Dr

City Arlington State VA Zip Code 22227-0000

Purpose of Disbursement
Staff Travel-Air

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27479.18

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

1132.20

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: SB21B.27480 Date of Disbursement																				
Mailing Address 2500 Virginia Ave NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	1		2	0	1	1												
City Washington State DC Zip Code 20037-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Potomac Press	Transaction ID: SB21B.27481 Date of Disbursement																				
Mailing Address 405 Glenn Drive #5	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	6		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	6		2	0	1	1												
City Sterling State VA Zip Code 20164-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non Candidate Party Printing Service Candidate Name	<table border="1"> <tr> <td colspan="10">4406.72</td> </tr> </table>	4406.72																			
4406.72																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) QuickBooks Payroll Service	Transaction ID: SB21B.27482 Date of Disbursement																				
Mailing Address PO Box 30015	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	7		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	7		2	0	1	1												
City Reno State NV Zip Code 89520-3015	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">94.34</td> </tr> </table>	94.34																			
94.34																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5001.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

QuickBooks Payroll Service

Mailing Address PO Box 30015

City
Reno

State
NV

Zip Code
89520-3015

Purpose of Disbursement
Payroll Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27483

Date of Disbursement

06 / 22 / 2011

Amount of Each Disbursement this Period

21.20

B.

Full Name (Last, First, Middle Initial)

Gary Sinawski

Mailing Address 180 Montague St., Apt 25-B

City
Brooklyn

State
NY

Zip Code
11201-3623

Purpose of Disbursement
LP Legal Expenses

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27486

Date of Disbursement

06 / 01 / 2011

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

Telecompute Corporation

Mailing Address P.O. Box 106019

City
Atlanta

State
GA

Zip Code
30348-6019

Purpose of Disbursement
LNC 1-800 Service

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27489

Date of Disbursement

06 / 06 / 2011

Amount of Each Disbursement this Period

53.80

SUBTOTAL of Disbursements This Page (optional) ►

3075.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Terra Eclipse, Inc.

Mailing Address 9043 Soquel Dr.

City
Aptos

State
CA

Zip Code
95003-0000

Purpose of Disbursement
LP.org Website Management

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27490

Date of Disbursement

06 / 06 / 2011

Amount of Each Disbursement this Period

1600.00

B.

Full Name (Last, First, Middle Initial)

Ticketmaster

Mailing Address 1601 Elm St., Ste. 700

City
Dallas

State
TX

Zip Code
75201-0000

Purpose of Disbursement
Merch Processing Fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27491

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

385.90

C.

Full Name (Last, First, Middle Initial)

United Healthcare Ins., Inc.

Mailing Address Dept. CH-10151

City
Palatine

State
IL

Zip Code
60055-0151

Purpose of Disbursement
Employee Health & Dental

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27492

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

1829.35

SUBTOTAL of Disbursements This Page (optional)

3815.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation Mailing Address PO Box 26644	Transaction ID: SB21B.27493 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 7 / 2 0 1 1</div> </div>
City Richmond State VA Zip Code 23261-6644 Purpose of Disbursement VA - Withholding Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>202.00</div> <div>001</div> Category/ Type
B. Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation Mailing Address PO Box 26644 City Richmond State VA Zip Code 23261-6644 Purpose of Disbursement VA - Withholding Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.27494 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 2 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>224.00</div> <div>001</div> Category/ Type
C. Full Name (Last, First, Middle Initial) Washington Flyer Mailing Address P.O.Box 17192 City Washington State DC Zip Code 20041-0045 Purpose of Disbursement Staff Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.27495 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 1 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>250.00</div> <div>001</div> Category/ Type

SUBTOTAL of Disbursements This Page (optional)

676.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) Whitaker Brothers, Inc.	Transaction ID: SB21B.27496 Date of Disbursement
Mailing Address 3 Taft Court	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 9 / 2 0 1 1</div> </div>
City Rockville State MD Zip Code 20850-0000	Amount of Each Disbursement this Period
Purpose of Disbursement Postage Meter Maint and Supply Candidate Name	<div> <div>499.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Whitaker Brothers, Inc.	Transaction ID: SB21B.27497 Date of Disbursement
Mailing Address 3 Taft Court	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 1 1</div> </div>
City Rockville State MD Zip Code 20850-0000	Amount of Each Disbursement this Period
Purpose of Disbursement Postage Meter Maint and Supply Candidate Name	<div> <div>286.20</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Worldwide Express - DHL	Transaction ID: SB21B.27498 Date of Disbursement
Mailing Address PO Box 7624	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 1 / 2 0 1 1</div> </div>
City Arlington State VA Zip Code 22207-7624	Amount of Each Disbursement this Period
Purpose of Disbursement Shipping Services Candidate Name	<div> <div>6.57</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

791.77

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A.

Full Name (Last, First, Middle Initial)

Worldwide Express - DHL

Mailing Address PO Box 7624

City
Arlington

State
VA

Zip Code
22207-7624

Purpose of Disbursement
Shipping Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.27499

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2011

Amount of Each Disbursement this Period

47.07

SUBTOTAL of Disbursements This Page (optional)

47.07

TOTAL This Period (last page this line number only)

88386.84